

JUL 27 2006

K052957

27-5 Leui-Dong, Yeongtong-Gu, Suwon-Si, Gyeonggi-Do, Korea 442-270  
Tel 82 31 207-2200 Fax 82 31 207-3933

**Dentium**

## 510(k) Summary

This summary of 510(k) safety and effectiveness information is being submitted in accordance with requirements of 21 CFR Part 807.92.

Date: \_\_\_\_\_

### 1. Company and Correspondent making the submission:

Name	Dentium Co., Ltd.
Address	27-5 Leui-Dong, Yeongtong-Gu, Suwon-Si, Gyeonggi-Do, Republic of Korea 442-270
Phone	+82 31 207-2200
Fax	+82 31 207-3933
Contact	Koo Yeol, Yoon

### 2. Device:

Proprietary Name – Implantium Prosthetics

Common Name – Abutment

Classification Name – Endosseous dental implant abutment

### 3. Predicate Device:

Implantium, Dentium Co., Ltd. K041368

Astra Tech Implants, Astra Tech Inc., K931767

### 4. Classifications Names & Citations:

21CFR 872.3630, NHA, Endosseous dental implant abutment, Class II

### 5. Description:

Implantium Prosthetics is a device made of titanium alloy intended for use as an aid in prosthetic rehabilitation. It consists of Healing Abutment, Combi Abutment, Screw Abutment, Dual Abutment, Angled Abutment, Ball Abutment, Temporary Abutment and Cover screw. Material is of Pure Titanium Grade 4 of ASTM F 67-00 or of Titanium alloy 6Al-4V of ASTM F 136-98. Its surface is partially TiN coated. It is supplied non-sterile.

### 6. Indication for use:

Implantium Prosthetics is intended for use as an aid in prosthetic rehabilitation.

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7. Review:

Implantium Prosthetics has the same device characteristics as the predicate device. Its materials, dimensions, and intended use are similar to devices currently marketed worldwide.

Implantium Prosthetics has been subjected to extensive safety, performance, and product validations prior to release. Safety tests have been performed to ensure the devices comply to applicable industry and US regulations.

8. Conclusions:

In accordance with the Federal Food, Drug and Cosmetic Act, 21 CFR Part 807, and based on the information provided in this premarket notification Dentium Co., Ltd. concludes that Implantium Prosthetics is safe and effective and substantially equivalent to predicate devices as described herein.

END

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DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Dentium Company, Limited  
C/O Ms. Cathryn N. Cambria  
Consultant  
Arkin Consulting Group  
5536 Trowbridge Drive  
Dunwoody, Georgia 30338

JUL 27 2006

Re: K052957  
Trade/Device Name: Implantium Prosthetics  
Regulation Number: 872.3630  
Regulation Name: Endosseous Dental Implant Abutment  
Regulatory Class: II  
Product Code: NHA  
Dated: July 12, 2006  
Received: July 14, 2006

Dear Ms. Cambria:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0115. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/industry/support/index.html>.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Chiu Lin", with a large, stylized loop at the end.

Chiu Lin, Ph.D.

Director

Division of Anesthesiology, General Hospital,

Infection Control and Dental Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

## Indications for Use

510(k) Number (if known): K052957

Device Name: Implantium Prosthetics

Indications for Use: Implantium Prosthetics is intended for use as an aid in prosthetic rehabilitation.

Prescription Use X  
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use \_\_\_\_\_  
(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE  
OF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

*Robert S. Betz DDS for Dr. Susan Reinner* Page 1 of 1  
(Signature)  
Division of Anesthesiology, General Hospital,  
Infection Control, Dental Devices

510(k) Number: K052957

000309